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<b>EPA</b>		<b>REGIONAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT</b>		PAGE 1		SITE NUMBER (to be assigned by EPA)	
				06		TX1066	
<b>GENERAL INSTRUCTIONS:</b> Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency, Site Tracking System, Hazardous Waste Enforcement Task Force (EM-335), 401 M St., SW, Washington, DC 20460.							
<b>I. SITE IDENTIFICATION</b> <u>TXD960873462</u>							
<b>A. SITE NAME</b>				<b>B. STREET (or other identifier)</b>			
Dow Chemical Co. Plant				Hwy. 523 at Hwy. 332			
<b>C. CITY</b>				<b>D. STATE</b>	<b>E. ZIP CODE</b>	<b>F. COUNTY NAME</b>	
Freeport				TX	77541	Brazoria	
<b>G. SITE OPERATOR INFORMATION</b>							
<b>1. NAME</b>				<b>2. TELEPHONE NUMBER</b>			
Dow Chemical Co.				709/238-2414			
<b>3. STREET</b>				<b>4. CITY</b>	<b>5. STATE</b>	<b>6. ZIP CODE</b>	
Hwy. 523 at Hwy. 332				Freeport	TX	77541	
<b>H. REALTY OWNER INFORMATION (if different from operator of site)</b>							
<b>1. NAME</b>				<b>2. TELEPHONE NUMBER</b>			
Same as above							
<b>3. CITY</b>				<b>4. STATE</b>	<b>5. ZIP CODE</b>		
<b>I. SITE DESCRIPTION</b>							
See Attachment A							
<b>J. TYPE OF OWNERSHIP</b>							
<input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE							
<b>II. TENTATIVE DISPOSITION (complete this section last)</b>							
<b>A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, &amp; yr.)</b>				<b>B. APPARENT SERIOUSNESS OF PROBLEM</b>			
				<input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input checked="" type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE			
<b>C. PREPARER INFORMATION</b>							
<b>1. NAME</b>				<b>2. TELEPHONE NUMBER</b>		<b>3. DATE (mo., day, &amp; yr.)</b>	
David Anderson <i>David Anderson</i>				214/742-6601		Feb. 5, 1985	
<b>III. INSPECTION INFORMATION</b>							
<b>A. PRINCIPAL INSPECTOR INFORMATION</b>				<b>2. TITLE</b>			
<b>1. NAME</b>				FET Chemist			
David Anderson							
<b>3. ORGANIZATION</b>				<b>4. TELEPHONE NO. (area code &amp; no.)</b>			
Ecology & Environment, Inc., 1509 Main, Dallas, TX 75261				214/742-6601			
<b>B. INSPECTION PARTICIPANTS</b>							
<b>1. NAME</b>		<b>2. ORGANIZATION</b>			<b>3. TELEPHONE NO.</b>		
James Hussey		Ecology & Environment, Inc.			214/742-6601		
<b>C. SITE REPRESENTATIVES INTERVIEWED (company officials, workers, residents)</b>							
<b>1. NAME</b>		<b>2. TITLE</b>		<b>3. TELEPHONE NO.</b>		<b>4. ADDRESS</b>	
Karen Shebart		Mgr. Environmental Svcs. & Oper.		409/238-2414		Dow Chemical Co., Freeport, TX 77541	
D.M. Turner		Environmental Operations		409/238-2414		" " SUPERFUND FILE	
John Carter		" "		" "		" " OCT 14 1982	
Daniel Moss		Environmental Services		409/238-2414		" " REORGANIZED	
Shetree Arnold		517/636-5855				Dow Chemical Co., Midland, MI 48640	

Reviewed by SAW-SC

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III. INSPECTION INFORMATION (continued)			
<b>D. GENERATOR INFORMATION (source of waste)</b>			
1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Dow Chemical Co.	409/238-2414	Freeport, TX	See Attachments B and C
<b>E. TRANSPORTER/HAULER INFORMATION</b>			
1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
Dow Chemical Co.	409/238-2414	Freeport, TX	See Attachments B and C
<b>F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.</b>			
1. NAME	2. TELEPHONE NO.	3. ADDRESS	
NA			
<b>G. DATE OF INSPECTION</b> (month, day, & year)	<b>H. TIME OF INSPECTION</b> 0800-1400 hrs.	<b>I. ACCESS GAINED BY:</b> (credentials must be shown in all cases) <input checked="" type="checkbox"/> 1. PERMISSION <input type="checkbox"/> 2. WARRANT	
<b>J. WEATHER (describe):</b> Partly cloudy, light winds, 45-55°F			
<b>IV. SAMPLING INFORMATION</b>			
A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.			
1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			
X    No samples taken during inspection			
<b>B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)</b>			
1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS	
HNu	Around disposal areas	No readings above background	

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G. PHOTOS		IV. SAMPLING INFORMATION (continued)	
1. TYPE OF PHOTOS		2. PHOTOS IN CUSTODY OF:	
<input checked="" type="checkbox"/> a. GROUND	<input type="checkbox"/> b. AERIAL	EPA Region VI Dallas (attached)	
D. SITE MAPPED:			
<input checked="" type="checkbox"/> YES. SPECIFY LOCATION OF MAPS			
See Attachments			
E. COORDINATES		3. LONGITUDE (deg.-min.-sec.)	
1. LATITUDE (deg.-min.-sec.)		95° 19' 05" W	
28° 56' 50" N			
V. SITE INFORMATION			
A. SITE STATUS			
<input type="checkbox"/> 1. ACTIVE (These industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)		<input checked="" type="checkbox"/> 2. INACTIVE (These sites which no longer receive waste.)	
<input type="checkbox"/> 3. OTHER (specify):			
(These sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)			
B. IS GENERATOR ON SITE?			
<input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (specify generator's four-digit SIC Code): 2812, 2865, 2869, 2813, 2819, 2821, 2822, 2835, 2841, 2873, 2879, 2899, 2911, 3339, 3369			
C. AREA OF SITE (in acres)		D. ARE THERE BUILDINGS ON THE SITE?	
See Attachment A (I.I.I.)		<input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> YES (specify):	
offices, labs, plant structures			
VI. CHARACTERIZATION OF SITE ACTIVITY			
Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.			
X	A. TRANSPORTER	B. STORER	C. TREATER
X	1. RAIL	1. PILE	1. FILTRATION
X	2. SHIP	2. SURFACE IMPOUNDMENT*	2. INCINERATION
X	3. BARGE	3. DRUMS	3. VOLUME REDUCTION
X	4. TRUCK	4. TANK, ABOVE GROUND	4. RECYCLING/RECOVERY
X	5. PIPELINE	5. TANK, BELOW GROUND	5. CHEM./PHYS./TREATMENT
X	6. OTHER (specify):	6. OTHER (specify):	6. BIOLOGICAL TREATMENT
			7. WASTE OIL REPROCESSING
			8. SOLVENT RECOVERY
			9. OTHER (specify):
			1. LANDFILL
			2. LANDFARM
			3. OPEN DUMP
			4. SURFACE IMPOUNDMENT
			5. MIDNIGHT DUMPING
			6. INCINERATION
			7. UNDERGROUND INJECTION
			8. OTHER (specify):
E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this form.			
<input type="checkbox"/> 1. STORAGE <input checked="" type="checkbox"/> 2. INCINERATION <input checked="" type="checkbox"/> 3. LANDFILL <input checked="" type="checkbox"/> 4. SURFACE IMPOUNDMENT <input checked="" type="checkbox"/> 5. DEEP WELL			
<input checked="" type="checkbox"/> 6. CHEM/BIO/PHYS TREATMENT <input type="checkbox"/> 7. LANDFARM <input type="checkbox"/> 8. OPEN DUMP <input checked="" type="checkbox"/> 9. TRANSPORTER <input type="checkbox"/> 10. RECYCLOR/RECLAIMER			
VII. WASTE RELATED INFORMATION			
A. WASTE TYPE			
<input checked="" type="checkbox"/> 1. LIQUID <input checked="" type="checkbox"/> 2. SOLID <input checked="" type="checkbox"/> 3. SLUDGE <input type="checkbox"/> 4. GAS			
B. WASTE CHARACTERISTICS			
<input checked="" type="checkbox"/> 1. CORROSIVE <input checked="" type="checkbox"/> 2. IGNITABLE <input type="checkbox"/> 3. RADIOACTIVE <input type="checkbox"/> 4. HIGHLY VOLATILE			
<input checked="" type="checkbox"/> 5. TOXIC <input checked="" type="checkbox"/> 6. REACTIVE <input type="checkbox"/> 7. INERT <input checked="" type="checkbox"/> 8. FLAMMABLE			
<input type="checkbox"/> 9. OTHER (specify):			
C. WASTE CATEGORIES			
1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.			
Dow has searched their records to obtain an estimate of the quantities of waste disposed.			

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WASTE RELATED INFORMATION (continued)											
2. Estimate the amount (specify unit of measure) of waste by category. Mark 'X' to indicate which wastes are present.											
a. SLUDGE		b. OIL		c. SOLVENTS		d. CHEMICALS		e. SOLIDS		f. OTHER	
AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE
See Attach. B	None	See Attach. B	None	See Attach. B	None	See Attach. B	None	See Attach. B	None	See Attach. B	None
(1) PAINT, PIGMENTS		(1) OILY WASTES		(1) HALOGENATED SOLVENTS		(1) ACIDS		(1) FLYASH		(1) LABORATORY, PHARMACEUT.	
X (2) METALS SLUDGES		(2) OTHER (specify)		X (2) NON-HALOGENATED SOLVENTS		(2) PICKLING LIQUORS		(2) ASBESTOS		(2) HOSPITAL	
(3) POTW				(3) OTHER (specify)		X (3) CAUSTICS		(3) MILLING/SPINNING TAILINGS		(3) RADIOACTIVE	
(4) ALUMINUM SLUDGE						(4) PESTICIDES		(4) FERROUS SMELTING WASTES		(4) MUNICIPAL	
(5) OTHER (specify)						(5) DYES/INKS		(5) NON-FERROUS SMELTING WASTES		X (5) OTHER (specify)	
						(6) CYANIDE		(6) OTHER (specify)		plant trash	
						(7) PHENOLS					
						(8) HALOGENS					
						(9) PCB					
						X (10) METALS					
						(11) OTHER (specify)					

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)											
1. SUBSTANCE	2. FORM (mark 'X')				3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	A. SOLID	B. LIQ.	C. V. A. FOR HIGH	D. E. V. A. FOR MED. LOW	E. HIGH	F. MED.	G. LOW	H. NONE			
Arsenic	X								7440-38-2	Unknown	
Chromium	X								7440-47-3	Unknown	
Lead	X								7439-92-1	Unknown	
Mercury	X								7439-97-6	Unknown	
Silver	X								7440-22-4	Unknown	
Magnesium sludge	X								7439-95-4	Unknown	
See Attachment C for listing of wastes from sources											

VII. HAZARD DESCRIPTION
FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.
<input checked="" type="checkbox"/> A. HUMAN HEALTH HAZARDS
Many of the listed wastes are toxic.

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VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☒ D. CONTAMINATION OF WATER SUPPLY

The primary drinking water supply is from lakes on the Brazos River 22 and 44 miles upstream from the site. Some groundwater is used in the area, however the aquifers in use are below the Beaumont Clay which underlies the area at a depth of approximately 80 feet.

☒ E. CONTAMINATION OF FOOD CHAIN

Shallow groundwater (water table) contamination has occurred. See VIII. U.

☒ F. CONTAMINATION OF GROUND WATER

Possible from groundwater migration to the Old Brazos River and Intercoastal Waterway, Dow Barge Canal, Dow and Freeport Water Supply Canals. All surface runoff from rainfall is discharged through NPDES outfalls after treatment.

☐ G. CONTAMINATION OF SURFACE WATER

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VIII. HAZARD DESCRIPTION (continued)

☐ H. DAMAGE TO FLOCS / FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☒ L. CONTAMINATION OF SOIL  
Soil in disposal areas is contaminated.

☐ M. PROPERTY DAMAGE

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VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION

☐ O. SPILL/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

☐ P. SEWER, STORM DRAIN PROBLEMS

☐ Q. EROSION PROBLEMS

☐ R. INADEQUATE SECURITY

☐ S. INCOMPATIBLE WASTES

VIII. HAZARD DESCRIPTION (continued)				
<input type="checkbox"/> T. MIDNIGHT DUMPING				
<input checked="" type="checkbox"/> U. OTHER (specify): <p>Groundwater monitoring is being and will continue to be conducted by DOW around the A-2 and A-100 disposal sites. No surface migration of contaminants was noted by the inspectors. The results of groundwater monitoring do not indicate contaminant migration from these areas.</p> <p>WDW-81, the plant A injection well was plugged in 1979 and is not operational.</p> <p>The A-27 landfill has no groundwater monitoring system. DOW believes that only non-hazardous, inorganic waste (magnesium sludge, plant trash) was disposed of in this area.</p> <p>DOW and the TDWR signed a compliance agreement 7/15/84 for remedial action at the A-1 disposal area. Migration of contaminants from the area in the groundwater has been documented in samples from monitor wells. A hydrocarbon/contaminated groundwater recovery system collecting 100,000 gallons of fluid per week for treatment is in operation currently as a part of the compliance agreement. DOW has hired an engineering consultant to assess the groundwater problem and to propose remedial measures. Monthly progress reports to the TDWR are required in the agreement.</p> <p>The EPA should coordinate with TDWR on DOW's planned remedial activities and their progress. Due to the compliance agreement between DOW and TDWR, no further FIT actions are recommended.</p>				
IX. POPULATION DIRECTLY AFFECTED BY SITE				
A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	6000	6000	1500	1 mile
2. IN COMMERCIAL OR INDUSTRIAL AREAS	4000	4000	320	1 mile
3. IN PUBLICLY TRAVELLED AREAS	7000	7000	NA	1 mile
4. PUBLIC USE AREAS (parks, schools, etc.)	2000	2000	20	1 mile
X. WATER AND HYDROLOGICAL DATA				
A. DEPTH TO GROUNDWATER (specify units)	B. DIRECTION OF FLOW		C. GROUNDWATER USE IN VICINITY	
5-10 ft. See Attachment A	E SE		residential and city	
D. POTENTIAL YIELD OF AQUIFER	E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)		F. DIRECTION TO DRINKING WATER SUPPLY	
See Attachment A	20 miles		NW	
G. TYPE OF DRINKING WATER SUPPLY				
<input type="checkbox"/> 1. NON-COMMUNITY < 15 CONNECTIONS <input checked="" type="checkbox"/> 2. COMMUNITY (specify town): DOW plant sv.com <input checked="" type="checkbox"/> 3. SURFACE WATER <input type="checkbox"/> 4. WELL See Attachment A				



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X. WATER AND HYDROLOGICAL DATA (continued)				
H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE				
1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COMMUNITY (Class "X")	5. COMMUNITY (Class "X")
None known				
I. RECEIVING WATER				
1. NAME Old Brazos River Channel #1111		<input type="checkbox"/> 2. SEWERS <input checked="" type="checkbox"/> 3. STREAMS/RIVERS <input type="checkbox"/> 4. LAKES/RESERVOIRS <input type="checkbox"/> 5. OTHER (specify): _____		
6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATER: contact and non-contact recreation				
XI. SOIL AND VEGETATION DATA				
LOCATION OF SITE IS IN				
<input type="checkbox"/> A. KNOWN FAULT ZONE <input type="checkbox"/> B. KARST ZONE <input type="checkbox"/> C. 100 YEAR FLOOD PLAIN <input checked="" type="checkbox"/> D. WETLAND <input type="checkbox"/> E. A REGULATED FLOODWAY <input type="checkbox"/> F. CRITICAL HABITAT <input type="checkbox"/> G. RECHARGE ZONE OR SOIL SOURCE AQUIFER				
XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED				
Mark "X" to indicate the type(s) of geological material observed and specify where necessary, the component parts.				
1. A. OVERBURDEN	2. B. BEDROCK (specify below)	3. C. OTHER (specify below)		
<input checked="" type="checkbox"/> 1. SAND	<input checked="" type="checkbox"/> Beaumont clay (no bedrock seen)			
<input checked="" type="checkbox"/> 2. CLAY				
<input type="checkbox"/> 3. GRAVEL				
XIII. SOIL PERMEABILITY				
<input type="checkbox"/> A. UNKNOWN <input type="checkbox"/> B. VERY HIGH (100,000 to 1,000 cm/sec.) <input type="checkbox"/> C. HIGH (1000 to 10 cm/sec.) <input type="checkbox"/> D. MODERATE (10 to .1 cm/sec.) <input type="checkbox"/> E. LOW (.1 to .001 cm/sec.) <input checked="" type="checkbox"/> F. VERY LOW (.001 to .0001 cm/sec.)				
G. RECHARGE AREA				
<input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO      3. COMMENTS: _____				
H. DISCHARGE AREA				
<input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO      3. COMMENTS: _____				
I. SLOPE				
1. ESTIMATE % OF SLOPE		2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.		
less than 1%		generally flat, slight slope to ESE.		
J. OTHER GEOLOGICAL DATA				
Plant is located in gulf tidal marsh area. Area is underlain by the Beaumont clay.				

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XIV. PERMIT INFORMATION							
List all applicable permits held by the site and provide the related information.							
A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark "X")		
					1. YES	2. NO	3. UNKNOWN
RCRA	EPA	TXD000803270	8/18/80, 11/19/80 (Pt. A)	Unknown			X
NPDES	EPA	TX0006438	12/28/74	6/30/86			X
State	TDWR	Solid Waste Reg. 30/06	Unknown	Unknown			X
Air	TACB	Unknown	Unknown	Unknown			X

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS	
<input type="checkbox"/> NONE	<input checked="" type="checkbox"/> YES (summarize in this space)
<p>Compliance agreement with TDWR effective 1/15/85.</p>	

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (Section II) information on the first page of this form.

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00 Landfill (A-1 Block)

LANDFILL SITE INSPECTION REPORT (Supplemental Report)	INSTRUCTION Answer and Explain as Necessary.
1. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc.) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. WASTES SURROUNDED BY SORBENT MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
5. DIVERSION STRUCTURES ARE EFFECTIVELY CONSTRUCTED AND PROPERLY MAINTAINED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
6. EVIDENCE OF PONDING OF WATER ON SITE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
8. ADEQUATE LEACHATE COLLECTION SYSTEM (If "Yes", specify Type) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
8a. SURFACE LEACHATE SPRING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
9. RECORDS OF LEACHATE ANALYSIS <input type="checkbox"/> YES <input type="checkbox"/> NO NA	
10. GAS MONITORING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
11. GROUNDWATER MONITORING WELLS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
12. ARTIFICIAL MEMBRANE LINER INSTALLED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
13. SPECIFIC CONTAINMENT MEASURES (Clay Bottom, Sides, etc.) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Clay bottoms and sides	
14. FIXATION (Stabilization) OF WASTE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
16. COVER (Type) Cover is natural soil in the area.	
16a. THICKNESS 2 1/2 - 5 ft.	
16b. PERMEABILITY very low	
16c. DAILY APPLICATION <input type="checkbox"/> YES <input type="checkbox"/> NO NA	

Landfill (A-41 Block)

LANDFILLS SITE INSPECTION REPORT (Supplemental Report)	INSTRUCTION Answer and Explain as Necessary.
1. EVIDENCE OF SITE INSTABILITY (i.e., Slump, Settling, Sink Holes, etc.) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. WASTES SURROUNDED BY ADSORBENT MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
5. DIVERSION STRUCTURES ARE EFFECTIVE - CONSTRUCTED AND PROPERLY MAINTAINED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
6. EVIDENCE OF PONDING OF WATER ON SITE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
8. ADEQUATE LEACHATE COLLECTION SYSTEM (If "Yes", specify Type) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 17 recovery wells, 160,000 gal/week recovered.	
9a. SURFACE LEACHATE SPRING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
9. RECORDS OF LEACHATE ANALYSIS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
10. GAS MONITORING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
11. GROUNDWATER MONITORING WELLS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
12. ARTIFICIAL MEMBRANE LINER INSTALLED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
13. SPECIFIC CONTAINMENT MEASURES (Clay bottom, Sides, etc.) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Clay bottom and sides	
14. FIXATION (Stabilization) OF WASTE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
16. COVER (Type) natural soil from area	
16a. THICKNESS 5 ft.	
16b. PERMEABILITY very low	
16c. DAILY APPLICATION <input type="checkbox"/> YES <input type="checkbox"/> NO NA	

A- Landfill

LANDFILLS SITE INSPECTION REPORT (Supplemental Report)	INSTRUCTION Answer and Explain as Necessary.
1. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc.) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
4. WASTES SURROUNDED BY SORBENT MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
5. DIVERSION STRUCTURES ARE EFFECTIVELY CONSTRUCTED AND PROPERLY MAINTAINED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
6. EVIDENCE OF PONDING OF WATER ON SITE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
8. ADEQUATE LEACHATE COLLECTION SYSTEM (If "Yes", specify Type) <input type="checkbox"/> YES <input type="checkbox"/> NO No system	
8a. SURFACE LEACHATE SPRING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
9. RECORDS OF LEACHATE ANALYSIS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
10. GAS MONITORING <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
11. GROUNDWATER MONITORING WELLS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
12. ARTIFICIAL MEMBRANE LINER INSTALLED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
13. SPECIFIC CONTAINMENT MEASURES (Clay Bottom, Sides, etc.) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Clay sides and bottom	
14. FIXATION (Stabilization) OF WASTE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
16. COVER (Type):  natural soil used for cover	
16a. THICKNESS:  2 - 5 ft.	
16b. PERMEABILITY:  very low	
16c. DAILY APPLICATION: <input type="checkbox"/> YES <input type="checkbox"/> NO  NA	

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A-2 Impoundments (A76 Block)

SURFACE IMPOUNDMENTS SITE INSPECTION REPORT (Supplemental Report)		INSTRUCTION Answer and Explain as Necessary.
1. TYPE OF IMPOUNDMENT		
earthen, 6 impoundments were constructed.		
2. STABILITY/CONDITION OF EMBANKMENTS		
NA		
3. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc.)		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
7. IMPOUNDMENT HAS LINER SYSTEM		7a. INTEGRITY OF LINER SYSTEM CHECKED
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO natural clay		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
7b. FINDINGS		
NA		
8. SOIL STRUCTURE AND SUBSTRUCTURE		
low permeability clay		
9. MONITORING WELLS		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
10. LENGTH, WIDTH, AND DEPTH		
LENGTH 150 ft. WIDTH 200 ft. DEPTH 10 ft.		
11. CALCULATED VOLUMETRIC CAPACITY		
200,000 cu. ft. each		
12. PERCENT OF CAPACITY REMAINING		
NA		
13. ESTIMATE FREEBOARD		
NA		
14. SOLIDS DEPOSITION		
<input type="checkbox"/> YES <input type="checkbox"/> NO NA		
15. DRESSING DISPOSAL METHOD		
NA		
16. OTHER EQUIPMENT		
Six impoundments were constructed at this site and were used from 1970 to 1976. Liquid contents were removed and incinerated beginning in 1975. Impoundments were filled in after removal of contents. Final cover consists of 2½ to 3 ft. of natural clay.		

ATTACHMENT A

POTENTIAL HAZARDOUS WASTE SITE  
SITE INSPECTION REPORT SUPPLEMENT SHEET

Instruction - This sheet is provided to give additional information in  
explanation of a question on the form T2070-3.

Corresponding  
number on form

Additional Remark and/or Explanation

I.i.

Dow Chemical Co. operates two chemical manufacturing plants at  
Freeport, TX. The two plants (Plant A and Plant B) cover 4000 acres.  
The inactive waste disposal facilities within Plant A are as follows:

A-100	landfill	(A1 Block)	1 ac
A-1	landfill	(A41 Block)	34 ac
A-2	impoundments	(A76 Block)	30 ac
A-27	landfill	(A27 Block)	2 ac
WDW	81	Plant A injection well	

Map 1 shows the locations of these disposal facilities within  
Plant A and the relationship of the two plants. Environmental Services  
and Operations of the two plants have been combined into one office.

X. A, D & G

The depth to groundwater (water table) is from 5 to 10 feet, with  
flow to the east southeast. Usable aquifers in the area include the  
Beaumont (150 ft. depth, 500 gpm yield), the Chico (400 ft. depth,  
yield greater than 500 gpm) and the Gulf Coast Sands (660 ft. depth,  
590 gpm yield). The towns of Clute and Lake Jackson and some individual  
homes use groundwater for their drinking water supply. Clute is  
7 miles NW of Plant A, Lake Jackson is 10 miles NW of Plant A.

The town of Freeport formerly used groundwater for its drinking  
water, however the wells have become brackish from salt water intrusion  
and are no longer used. Freeport and DOW, which operates its own  
water treatment system, both currently use water from lakes located  
at miles 2 and 44 of the Brazos River, NW of the site.

Attachment B

Following is a summary of the types and amounts of waste disposed of at each facility; and the years of use.

- A-100 Landfill: used from 1945 to 1950; 1,000,000 lbs. of caustics, plant trash and drummed hydrocarbons (photos 1-7, map 2).
- A-1 Landfill: used from 1953 to 1973; 1,253,300,000 lbs. of magnesium sludge, R-cake and miscellaneous organics (photos 15-18, map 3).
- A-2 Impoundment: used from 1970 to 1976; 56,010,000 lbs. of chlorinated hydrocarbons; liquid contents removed and incinerated beginning in 1975, no waste currently present (photos 8-13, map 4).
- A-27 Landfill: used from 1948 to 1952; 200,000 lbs. of magnesium sludge and plant trash (photos 1-4, map 5).
- WDW-81 Plant A injection well: used from 1971 to 1974; 12,000,000 lbs. of aqueous solutions of organics and inorganics from glycol A and ethylene dichloride plants; injected at 6295-6356 ft. Plugged 12-79 (see photo 14).



ATTACHMENT C

Hazardous waste from specific and nonspecific sources

Hazardous Waste Number	Description
D001 -	EPA ignitable waste
D002 -	EPA corrosive waste
D003 -	EPA reactive waste
K016 -	Carbon tetrachloride production waste
K017 -	Epichlorohydrin production waste
K018 -	Ethyl chloride production waste
K019 -	Ethylene dichloride production waste
K027 -	Toluene diisocyanate production waste
K028 -	1,1,1-Trichloroethane production waste, spent catalyst
K029 -	1,1,1-Trichloroethane production waste, steam stripper
K073 -	Chlorinated hydrocarbons waste from chlorine production
K095 -	1,1,1-Trichloroethane production waste
K096 -	a,a,a-Trichloroethane 1,1,1 production waste
F001 -	Spent halogenated degreasing solvents: tetrachloroethene, trichloroethene, methylene chloride, 1,1,1-trichloroethane, carbon tetrachloride, chlorinated fluorocarbons; sludge from the recovery of these solvents.
F002 -	Spent halogenated solvents and the still bottoms from their recovery; tetrachloroethene, methylene chloride, trichloroethene, 1,1,1-trichloroethene, chlorobenzene, 1,1,2-trichloro-1,2,2-trifluoroethane, O-dichlorobenzene, trichlorofluoromethane.
F003 -	Spent non-halogenated solvents and still bottoms from their recovery; xylene, acetone, ethyl acetate, ethyl benzene, ethyl ether, n-butyl alcohol, cyclohexanone.
F005 -	Spent non-halogenated solvents and still bottoms from their recovery; methanol, toluene, methyl ethyl ketone, methyl isobutyl ketone, carbon disulfide, isobutanol, pyridine.
F007 -	Spent plating bath solutions from electroplating solutions.
F008 -	Plating bath sludges from the bottom of plating baths from electroplating operations.
F009 -	Spent stripping and cleaning bath solution from electroplating operations.

Note: Amounts of each waste are unknown. No CAS numbers.

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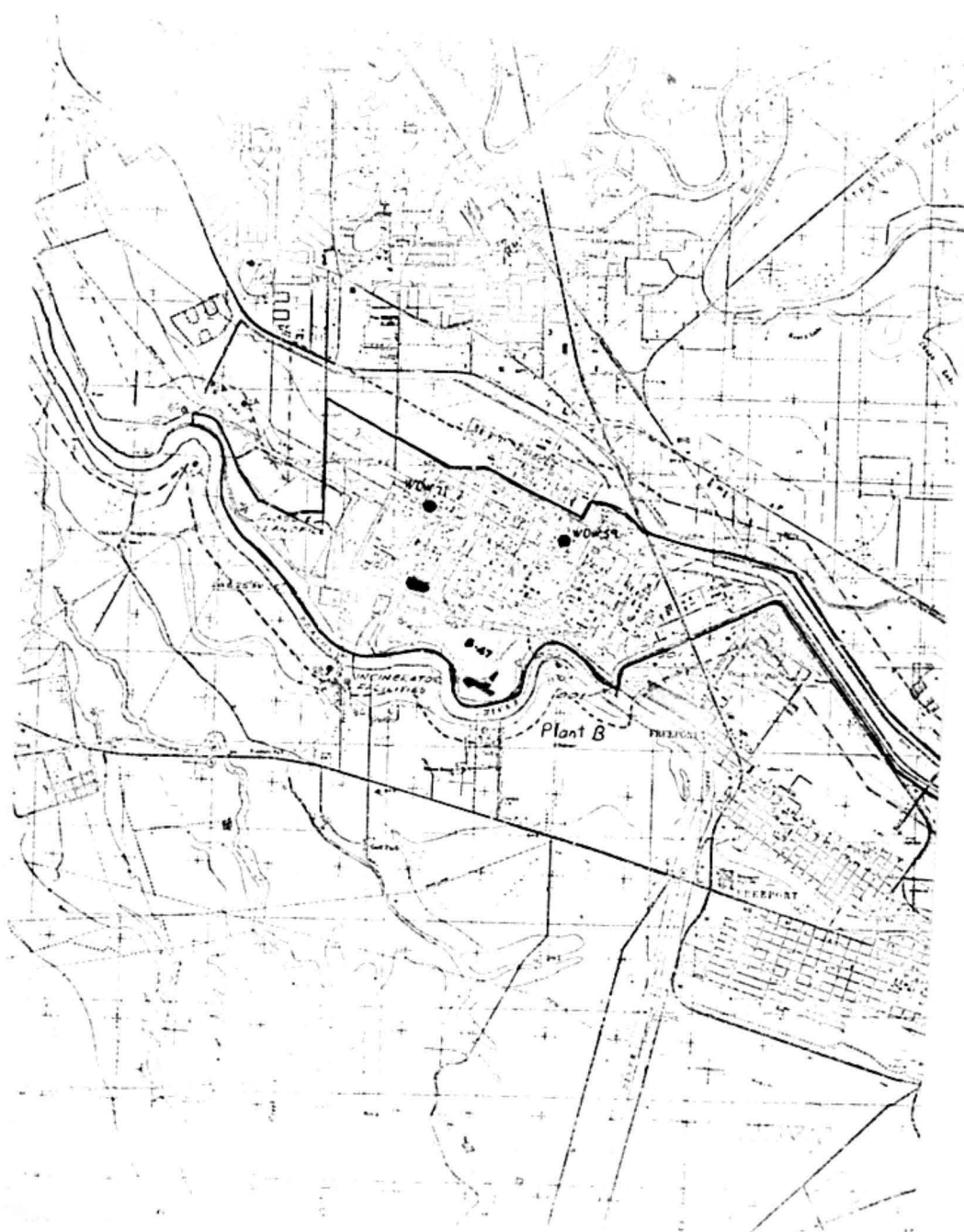
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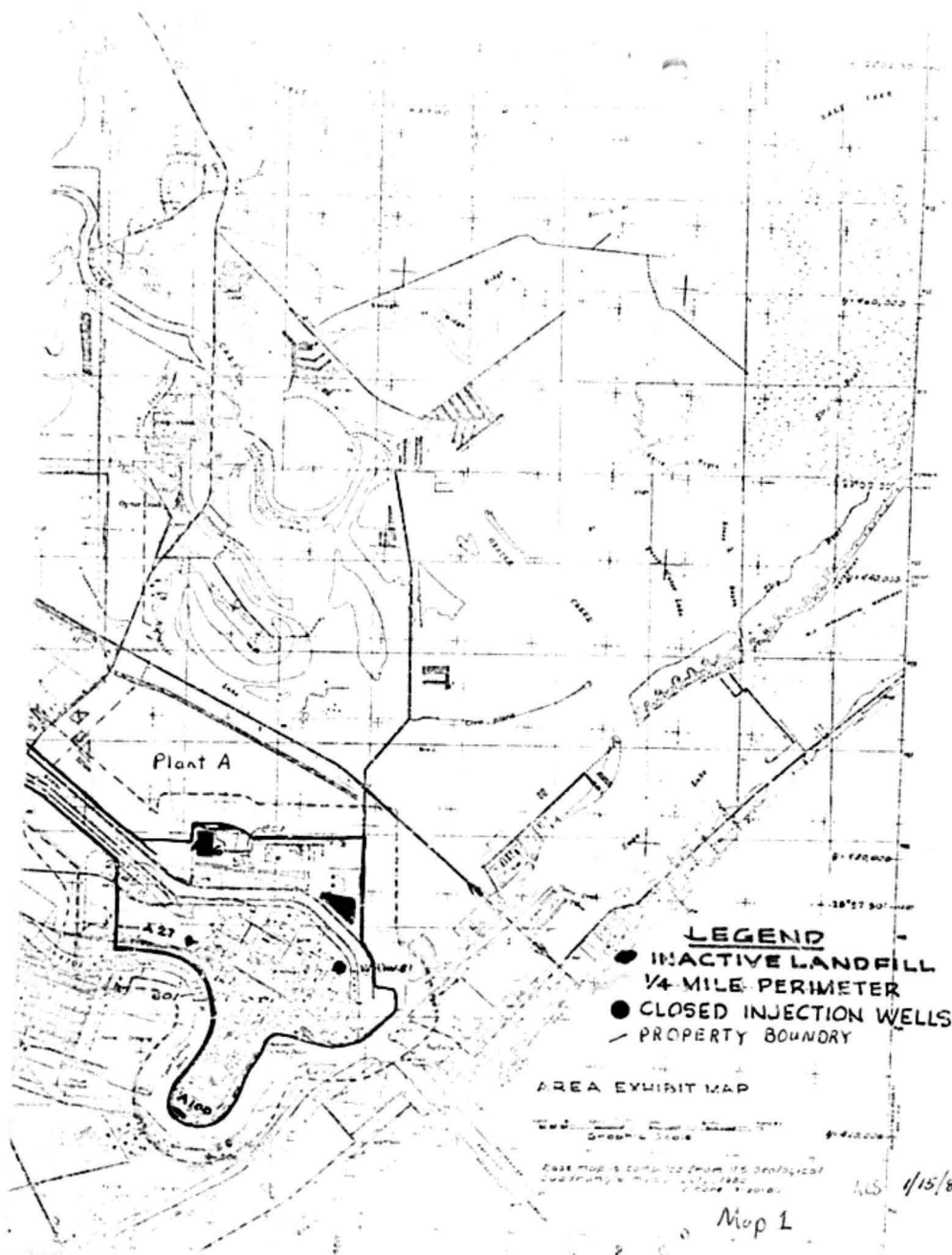
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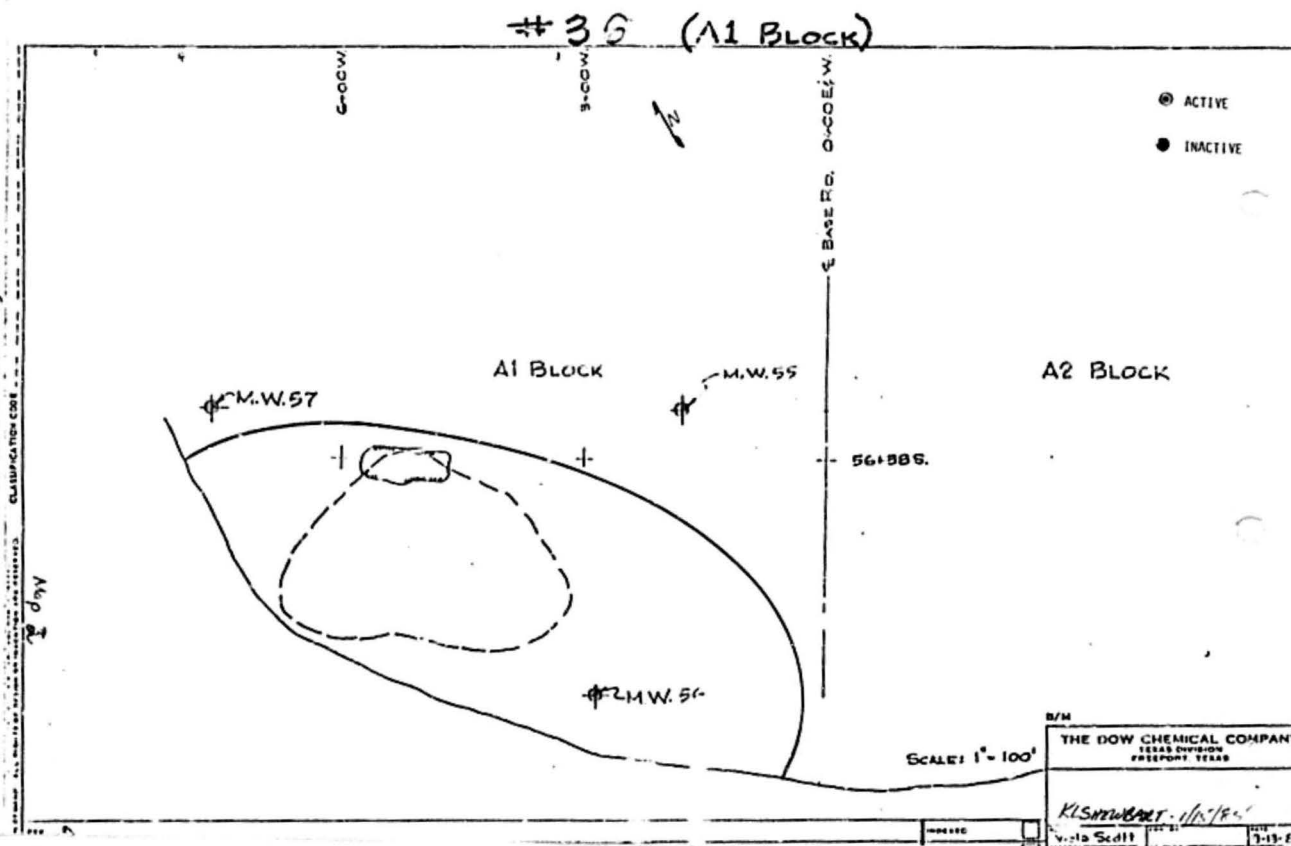


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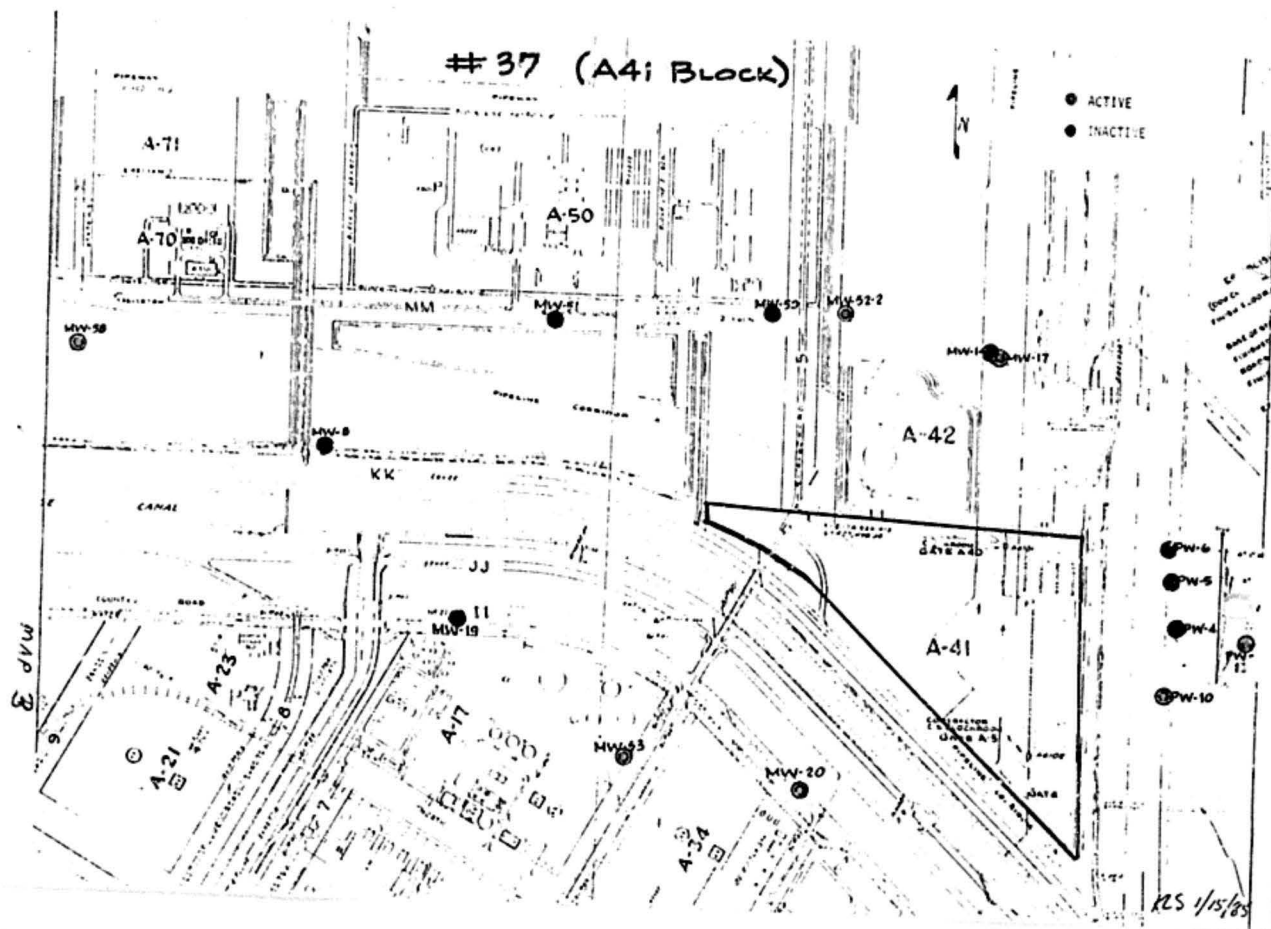
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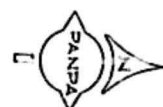
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● INACTIVE

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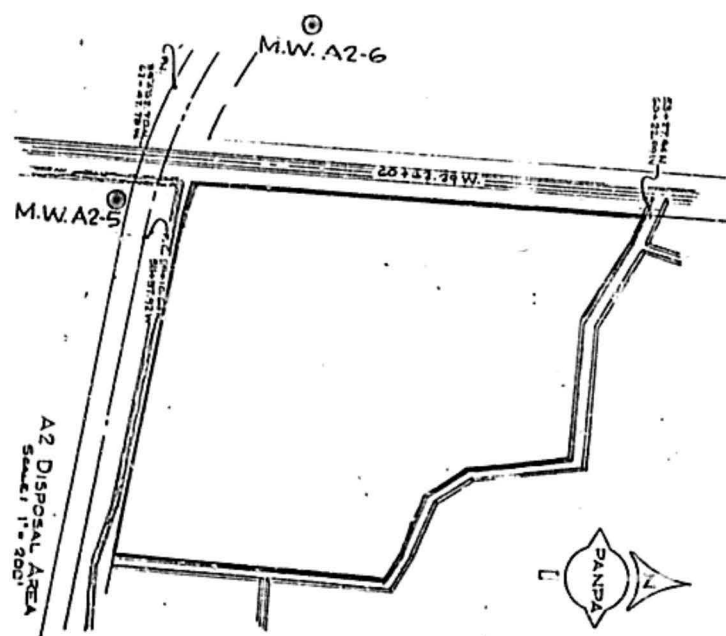


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M.W. A2-3  
⑤

#3E (A7E BLOCK)

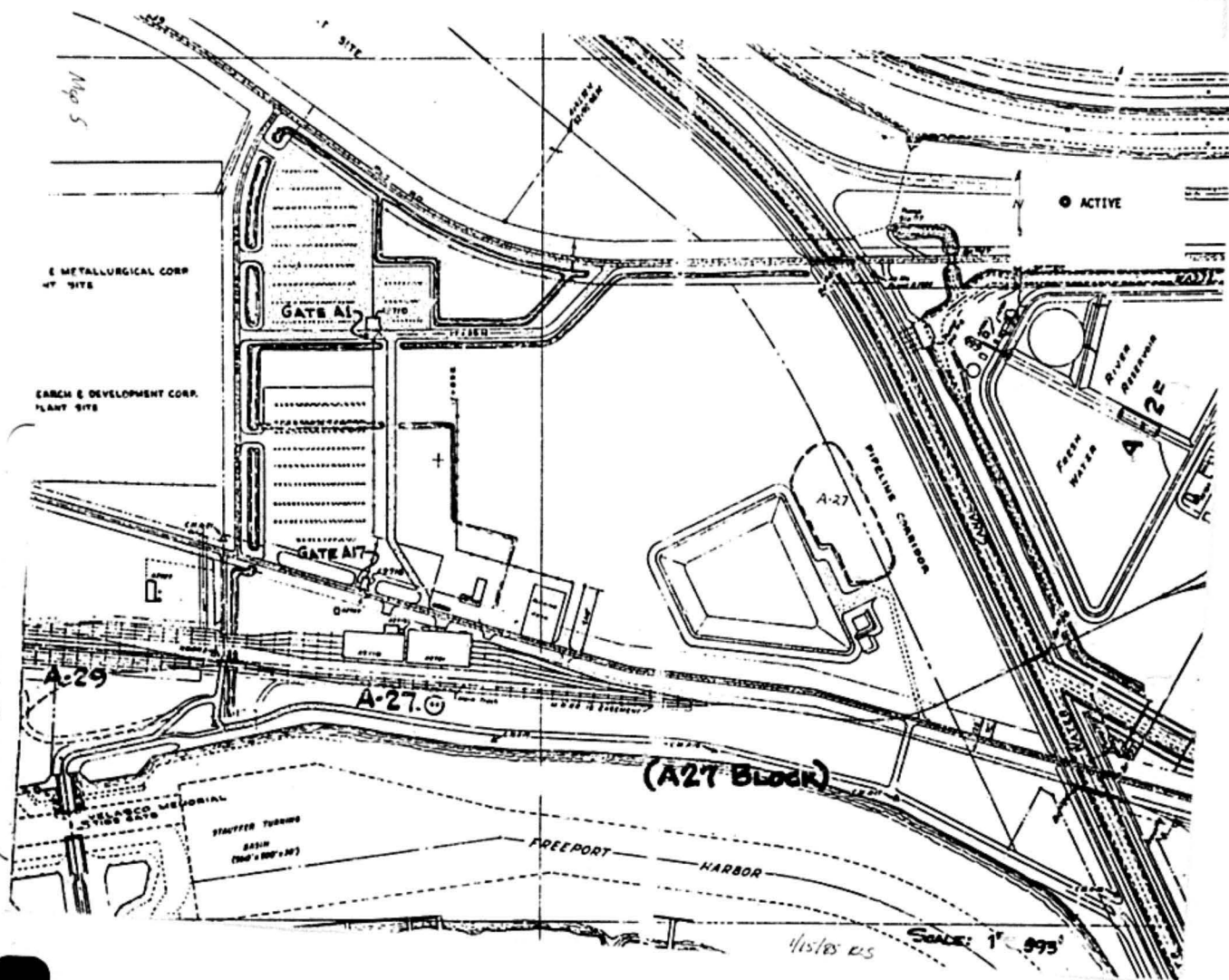
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Map

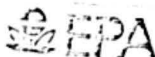
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RECEIPT FOR RECORDS



David Anderson *FIT*  
(Name & Title of EPA Representative)

1-15-85

*David Anderson*  
(Signature)

Description of Documents Collected  
(Description of letters should include the date and names of  
addressee and sender; description of records should include  
title, date, and if signed, the name of person signing.)

General map showing location of disposal facilities 7-20-80  
# 37 (A 41 Block) map 1-15-85  
# 38 (A 76 Block) map 1-15-85  
Was'c Disposal Area Plant B Blocks B472 B49 9-7-83  
# 36 (A 1 Block) map 1-15-85  
(A27 Block) map 1-15-85

Acknowledgement of Facility Representative

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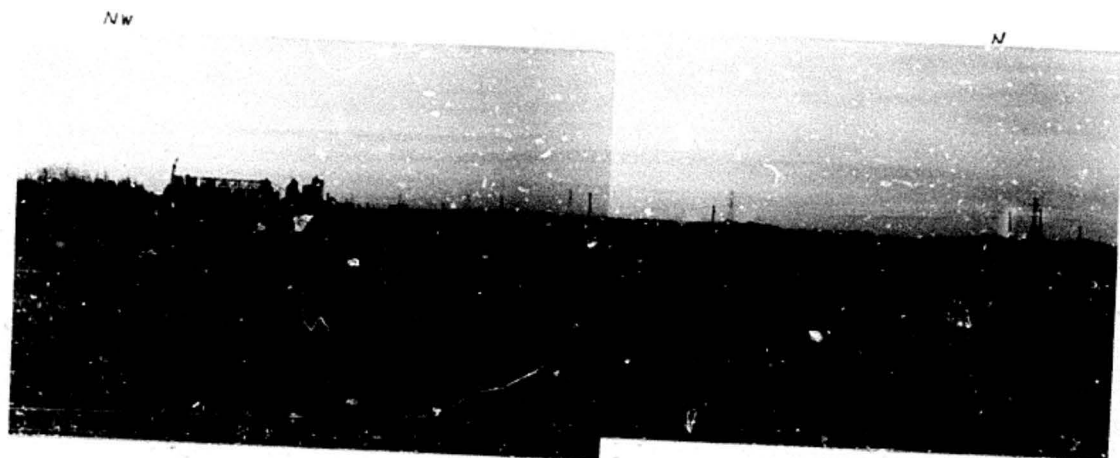
K.L. SHEWBART, MGR., ENV. SER. & OP.  
(Name & Title of Facility Representative)

*K.L. Shewbart*  
(Signature)

THE DOW CHEMICAL CO - TX OPERATIONS, B-1226, FREEPORT, TX 77541  
(Facility Name and Address)

DISTRIBUTION: One copy to Facility Representative  
One copy for Inspector's Records  
Original to Regional Office (645-SC)

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Photographer / Witness

David Anderson / James E. Hensley

Date / Time / Direction

1-15-85 / 1007 / NW to NE

Comments:

photos 1-2 of 4 photo

panorama of A-27

disposal area

photo from S of area

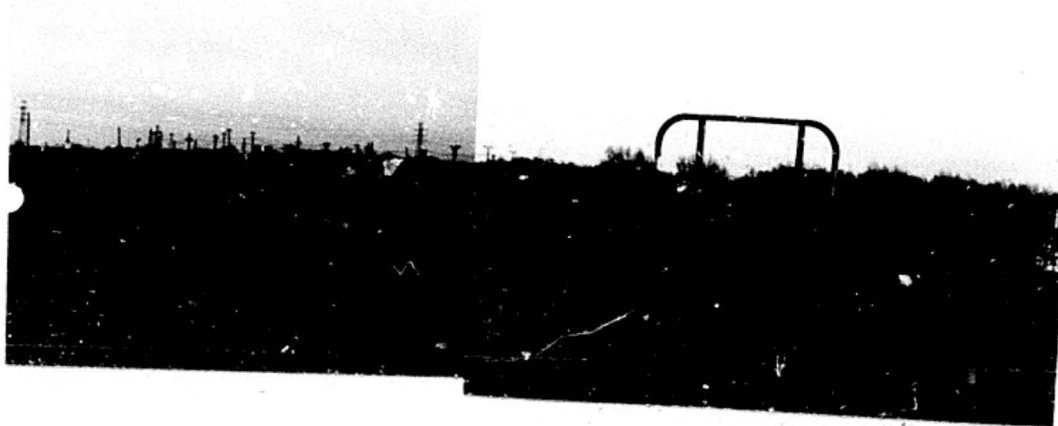
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N/E



Photographer / Witness

David Anderson / E. Hensley

Date / Time / Direction

1-15-85 / 1007 / NW to NE

Comments:

photo 3 & 4 of a 4 photo

panorama of A-27

disposal area

1st photo 3000

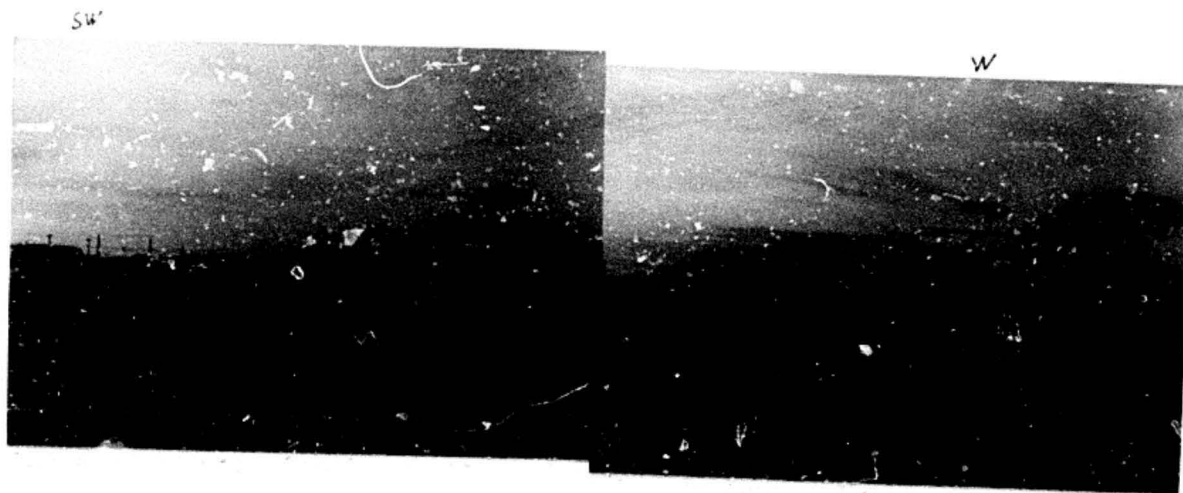
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Photographer / Witness

David Anderson

James E. Hussey

Date / Time / Direction

1-15-82 / 1018 / SW to NW

Comments:

photos 1 & 2 of 3 photos

panorama of A-100 (A-100)

disposal area

photos from east of area

by photo 6 & 7

10

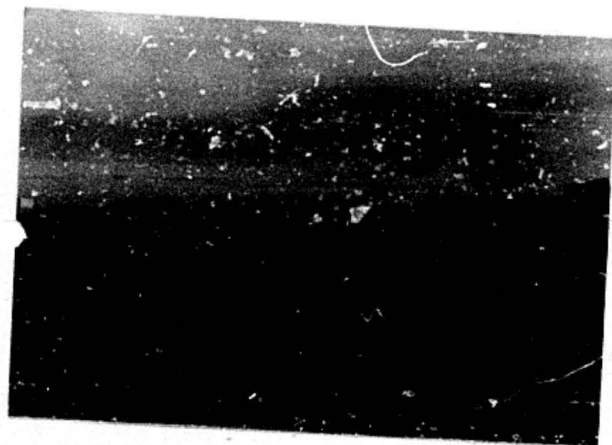
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NW



Photographer / Witness

David Anderson / James E. Husey

Date / Time / Direction

1-15-85 / 1015 / SW to NW

Comments:

photo 3 of 3 photos panorama

of A-100 (A-1 block)

disposal area

155 photo 5

0

3

5

7

N



Photographer / Witness

James Carlson / James E. Hickey

Date / Time / Direction

1-15-85 / 11040 / N to S

Comments:

photos 1 & 2 of a 6 photo

portions of the A-2 (A's black)

disposal area. photos from east

of area

log photos 8 & 9

0  
3  
5  
7

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E



Photographer / Witness

David Anderson / James F. Newby

Date / Time / Direction

1-15-85 / 1040 / AT N S

Comments:

photos 3 & 4 of a 6 photo panorama

of the A-2 (A-76 Block)

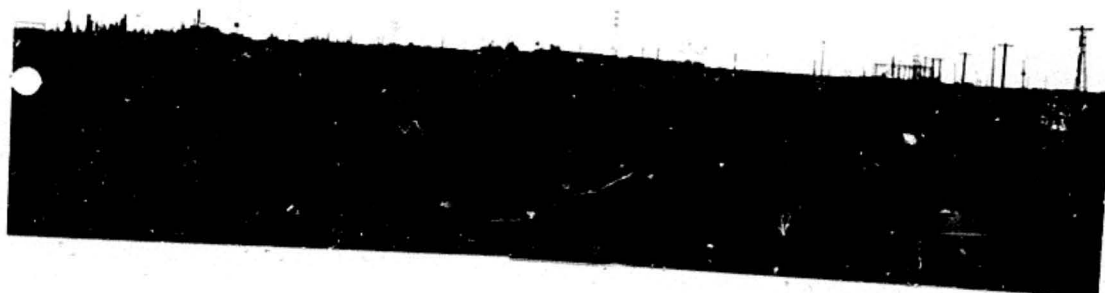
disposal area

103 photos 10411

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1  
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9

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S



Photographer / Witness

David Adams / James E. Hines

Date / Time / Direction

1-15-85 / 1840 / N to S

Comments:

photos 506 of 1 photo panorama  
of the 14-2 (14-716 block)

disposal area

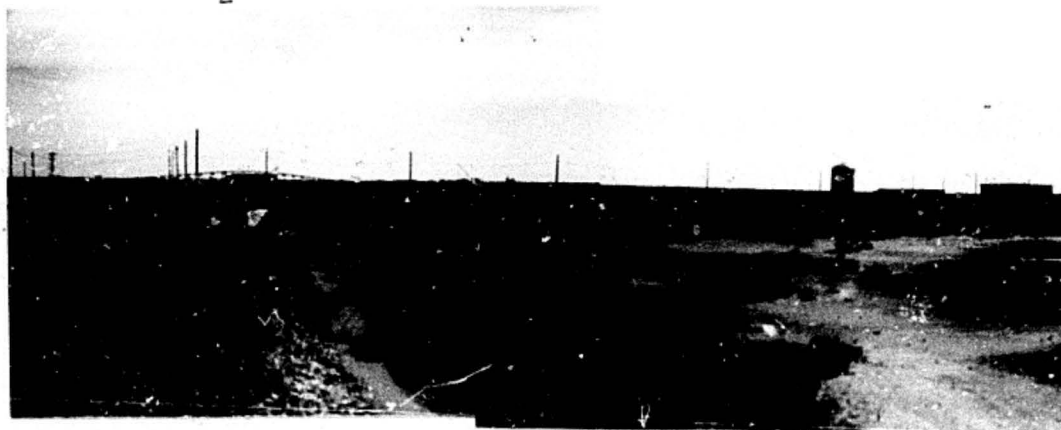
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3  
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E



Photographer / Witness

Steve Anderson / J. M. Hursey

Date / Time / Direction

1-15-85 / 1104 / E to SSE ✓

Comments:

photos 1a-2 etc 4 photo panorama

at the A-1 (A-41 Block)

disposal area photos taken

from NW corner

by photo 16-17b

0

3

6

5

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SSE



Photographer / Witness

David Brown James E. Hurley

Date / Time / Direction

11-25/1104 / E to SSE

Comments:

photos 3x4 of a 4 photo panorama

of the A-1 (A-41 block)

disposal area

log photos 17x18

0

3

6

7



Photographer / Witness

*Donald Wilson James E. Kinsey*

Date / Time / Direction

*1-15-85 / 10:50 / N.W.*

Comments: *WDW 8.*

*plant A injection well*

*log photo 14*

Photographer / Witness

Date / Time / Direction

Comments:

Photographer / Witness

Date / Time / Direction

Comments:

1  
3  
5  
8